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DECL	ADATION	EOD	UTILITY OR	Attorney Doct	ket Number	BDC-PT00	BDC-PT001.1			
DECL			UTILITY OR	First Named I	nventor	William E.	. Coville			
DESIGN PATENT APPLICATION					COMPLETE IF KNOWN					
•	(37 CF			Application Nu	ımber					
	•		daration mitted after Initial ng (surcharge CFR 1.16 (e)) uired)	Filing Date						
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Asak	Almy named Imm	ntor I ho	tity declare that							
As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name.										
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names	e i am the onginal are listed below) o	of the subj	scie inventor (il only d act maildr which is cl	one name is listed balo simed and for which a	w) or an onginal patent is sought	on the invention er	ntitied:			
М				ıl Magnetic Stimi			and			
L	Chaotic Mixing in Various States, Without Compromising Components									
the specification of which (Title of the Invention) But astached hereto										
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT Intermational										
Application Number and was amended on (MM/DD/YYYY) (# applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as										
	amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose Information which is material to patentability as defined in 37 CFR 1.56.										
I hereby claim foreign priority benefits under S5 U.S.C. 119(a)-(d) or 385(b) of any foreign application(a) for patent or inventor's certificate, or 385(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's cartificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
	for Foreign Application Number(s) Country		Country	Foreign Filling Date (MM/DD/YYYY)	Priority Not Claime		py Attached?			
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SS/028 attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
App	Ilcation Numbe	<u>u(a)</u>		(MM/DD/YYYY)						
	60/393,638 07/03/			3/2002	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
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[Page 1 of 2]

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a valid OMB control number. **DECLARATION** — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 385(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentiablity as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application. **Parent Patent Number** U.S. Parent Application or PCT Parent **Parent Filing Date** (If applicable) Number (MM/DD/YYYY) Additional U.S. or PCT Intermetional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pater and Trademark Office connected therawith: XX Customer Number Place Customer 3624 Number Bar Code Registered practitioner(s) name/registration number listed below Label nam Registration Registration Name Number Name Number Namely, the Attorneys of Volpe and Koenig, P.C. Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto, Direct all correspondence to: X Customer Number 3624 OR Correspondence address below or Bar Code Label VOLPE AND KOENIG, P.C. Name Address Address City State ZIP Country Telephone Fax I hereby declare that all statements made harein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle (if anyl) Family Name of Sumame William E. Coville biventor's Signature win Levittown PA USA US Residence: City Country Citizenship 125 Highland Park Drive Post Office Address Post Office Address PA Levittown 19056 USA Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/D2A attached hereto

Additional inventors are being named on the

Please type a plus sign (+) inside this box ——

Pto/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0851-0032

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

A Desire and the second					***				
Name of Additional Joint Inventor, if any: A petition has been filled for this unsigned inventor									
Given Name (first and middle [if any])			Family Na	ame or S	Surname				
Donald G.	Ware								
Inventor's Signature Could I (Jed				Date 7/2/03					
Residence: City		_{te} PA		Country	USA		Citizenship US		
Mailing Address 681 Woodlawn Drive									
Mailing Address						/			
c _{ity} Lansdale	Sta	te PA		ZIP	19446	Count	y USA		
Name of Additional Joint Inventor, if any:									
Given Name (first and middle [if any])			Family Name or S			Sumame			
Inventor's Signature					Date				
Residence: City	Sta	State		Country			Citizenship		
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Name of Additional Joint Inventor, if any:									
Given Name (first and middle [if any])		Family Name or Surname							
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